

Statistical Brief #01: The Uninsured in America - 2000

Estimates for the Civilian Noninstitutionalized Population Under Age 65

Introduction

The uninsured population in the United States is an issue of public policy concern for several reasons. First, health insurance is viewed as necessary to ensure that people have access to medical care and protection against the risk of costly and unforeseen medical events. Timely and reliable estimates of the population's health insurance status are vital to evaluate the costs and expected impact of public policy interventions to expand coverage or to change the way that private and public insurance is funded. Finally, comparisons of the characteristics of insured and uninsured populations over time give information on whether greater equity has been achieved in insurance coverage or whether serious gaps remain.

Data from the 2000 Medical Expenditure Panel Survey (MEPS) of the Agency for Healthcare Research and Quality (AHRQ) show that health insurance status among people under 65 varies according to demographic characteristics such as age, race/ethnicity, sex, and marital status. This report shows the size of the civilian noninstitutionalized population under age 65 that was uninsured throughout the first half of 2000 and identifies groups especially at risk of lacking health insurance. MEPS health insurance estimates for 2000 are not significantly different from 2000 MEPS estimates.

Definition of Uninsured

The uninsured were defined as people not covered by Medicare, TRICARE (Armed-Forces-related coverage), Medicaid, other public hospital/physician programs, or private hospital/physician insurance (including Medigap coverage) from January 2000 through the MEPS interview date. People covered only by noncomprehensive State-specific programs (e.g., Maryland Kidney Disease Program) or private single-service plans (e.g., coverage for dental or vision care only, coverage for accidents or specific diseases) were not considered to be insured.

Findings

In early 2000, 16.7 percent of the U.S. civilian noninstitutionalized population (45.9 million people) were uninsured and 18.8 percent (45.7 million people) of these Americans under the age of 65 were uninsured (data not shown). Age plays a key role in whether a person has health insurance coverage. Young adults ages 19-24, 33.9 percent of whom were uninsured, were the age group at the greatest risk of being uninsured (Figure 1). This group composed 9.4 percent of the total non-elderly population but 16.8 percent of the uninsured population (data not shown). For children (age less than 18) 14.5 percent were uninsured, 62.4 percent had private insurance and the remainder (23.1 percent) had public insurance only. This compares to 13.9, 64.1, and 22.0 percent respectively for 2000 (data not shown). For children, estimates between the two years are not significant.

Among people under age 65, minorities were substantially more likely than whites to lack health insurance. For all Hispanics under 65, 37.7 percent were uninsured, compared to 20.2 percent of black non-Hispanics and 14.9 percent of white non-Hispanics (Figure 2). Although 68.4 percent of non-elderly Americans were white non-Hispanics, they accounted for only 54.3 percent of uninsured persons (Figure 3). Among males under age 65 (Figure 4), being uninsured was more likely among Hispanics (39.9 percent) than among black non-Hispanics (21.3 percent) or white non-Hispanics (15.7 percent). Similarly, among females under 65, being uninsured was more likely among Hispanics (35.5 percent) than among black non-Hispanics (19.2 percent) or white non-Hispanics (14.2 percent).

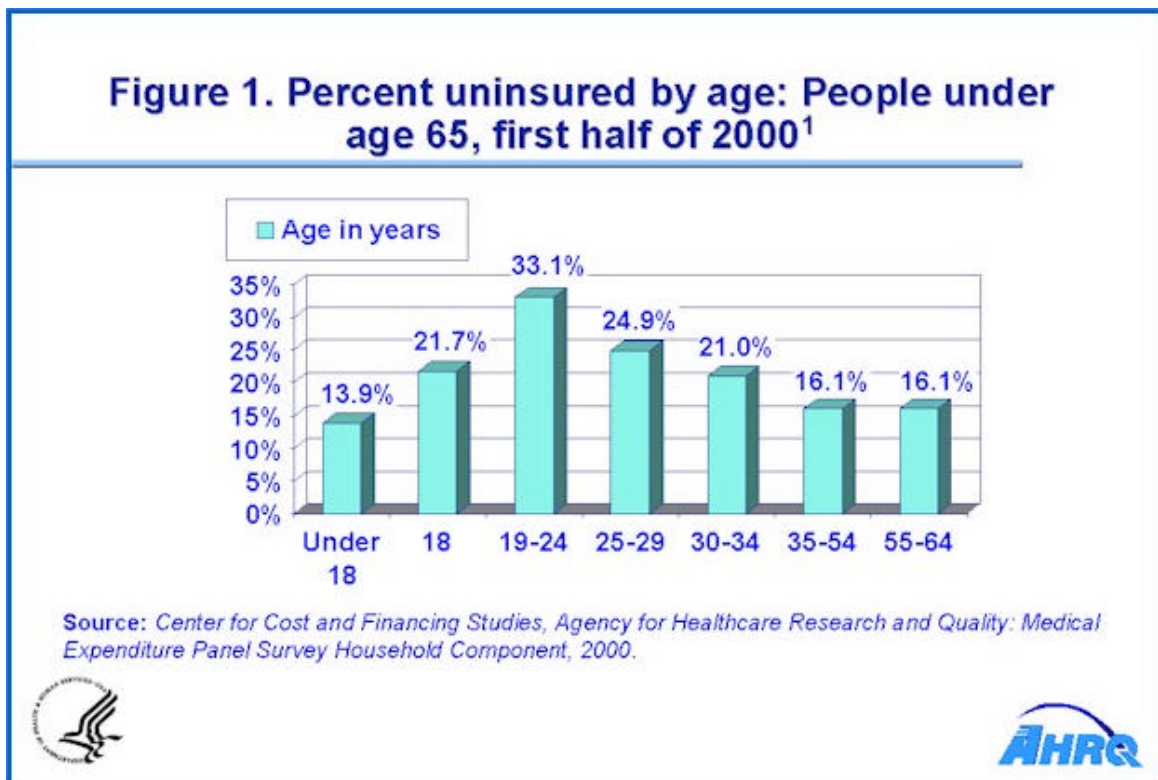
Persons who never married accounted for nearly a quarter (23.2 percent) of the non-elderly population but over a third (35.3 percent) of the uninsured population (data not shown). Also, about a third (32.3 percent) of all persons under 65 who were separated were uninsured (Figure 5).

Briefly Stated

- In the first half of 2000, 16.7 percent of the U.S. civilian noninstitutionalized population were uninsured.
- Among the U.S. civilian noninstitutionalized population under 65, more than a third of Hispanics (37.7 percent) and 20.2 percent of black non-Hispanics were uninsured during the first half of 2000, compared with 14.9 percent of white non-Hispanics.
- Among people under 65, Hispanics accounted for one-fourth (26.3 percent) of the uninsured civilian noninstitutionalized population even though they represented only 13.1 percent of the overall population this age
- Young adults ages 19-24 were the age group at the greatest risk of being uninsured, with one-third (33.9 percent) of this group lacking health insurance.

About MEPS

The Medical Expenditure Panel Survey (MEPS) collects nationally representative data on health care use, expenditures, sources of payment, and insurance coverage for the U.S. civilian noninstitutionalized population. MEPS is cosponsored by the Agency for Healthcare Research and Quality (AHRQ) and the National Center for Health Statistics (NCHS). This *Statistical Brief* summarizes data concerning the characteristics of the uninsured population in the United States during the first half of 2000, as derived from the MEPS Household Component. For more information about MEPS, see the sources listed on the back page.

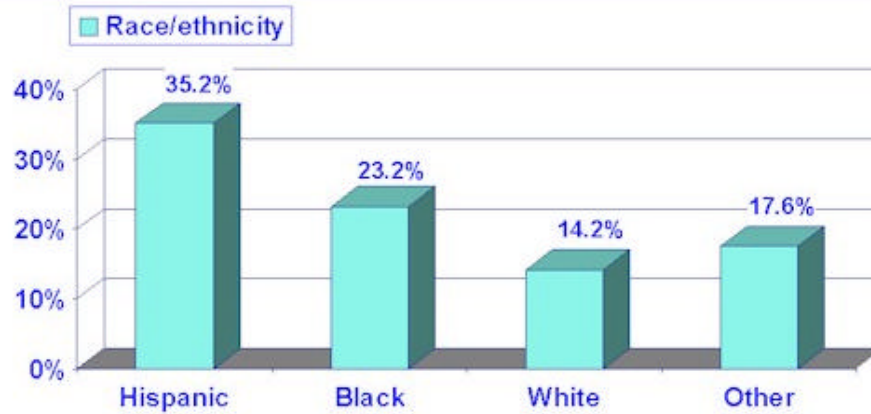


Young adults ages 19-24 were more likely than any other age group to be uninsured.

¹ The estimates refer to the percentage uninsured for a given age group. For example, 13.9% of the “Under 18” age group are uninsured. Thus, for every 1000 persons under the age of 18, 139 are uninsured. Among the 18 year olds, 217 out of 1000 are uninsured, and etc. The estimates for the different age groups should not be added together.

Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.

**Figure 2. Percent uninsured by race/ethnicity:
People under age 65, first half of 2000**



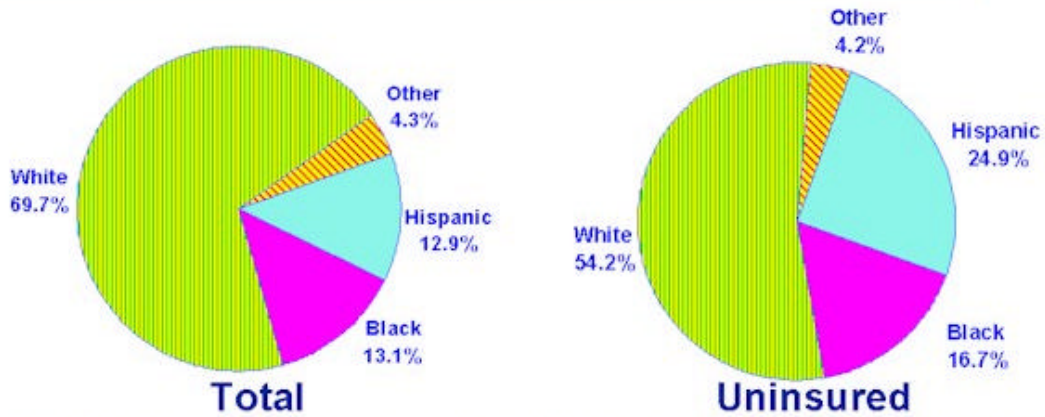
Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.



Whites were less likely to be uninsured than Hispanics or Blacks.

Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.

Figure 3. Percent distribution of total population and the uninsured by race/ethnicity: People under age 65, first half of 2000



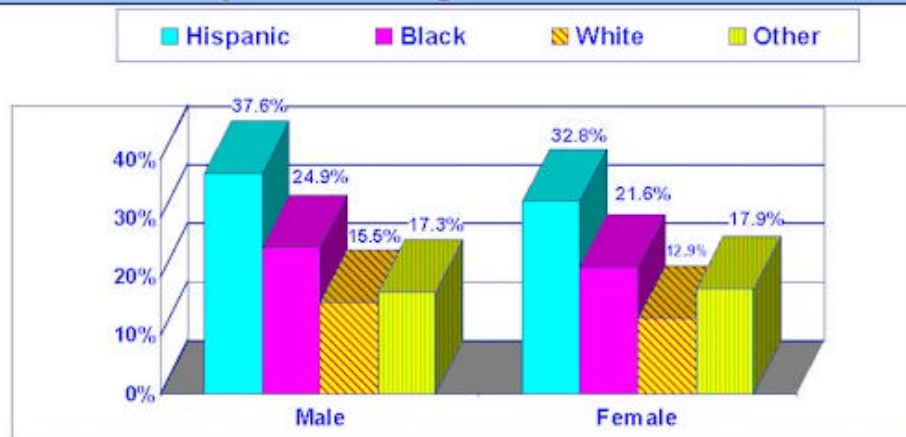
Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.



Hispanics were disproportionately represented among the uninsured.

Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.

Figure 4: Percent uninsured by race/ethnicity and sex: People under age 65, first half of 2000



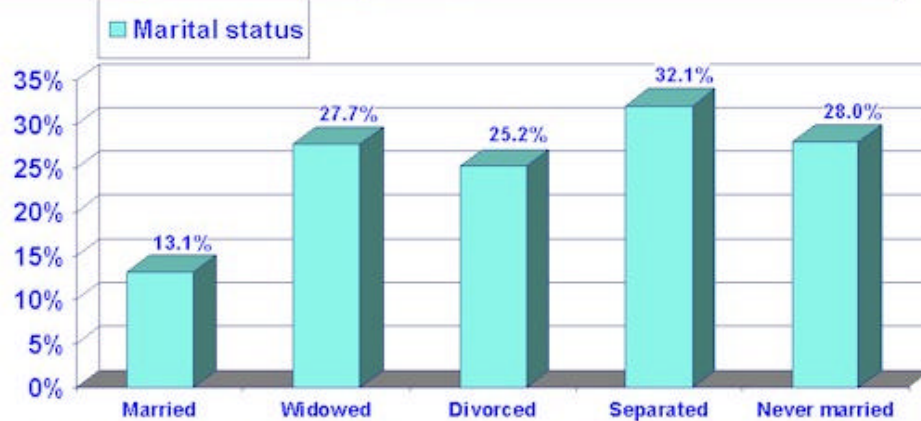
Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.



Among both males and females, Hispanics were the most likely to be uninsured.

Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.

**Figure 5. Percent uninsured by marital status:
People under age 65, first half of 2000**



Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.



Married people were the least likely to be uninsured.

Source: Center for Cost and Financing Studies, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2000.

The Uninsured in America - 2000

For more information about MEPS, call the MEPS information coordinator at AHRQ (301-594-1406) or visit the MEPS Web site at:

<http://www.meps.ahrq.gov/>

For a detailed description of the MEPS survey design, sample design, and methods used to reduce sources of nonsampling error, see the following publications:

Cohen J. Design and methods of the Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. MEPS Methodology Report No. 1. AHCPR Pub. No. 97-0026.

Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. MEPS Methodology Report No. 2 AHCPR Pub. No. 97-0027.